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**DEC. 14 2005**

10/634,419

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PC25286A

**IN THE UNITED STATES PATENT & TRADEMARK OFFICE**

APPLICATION NO. : 10/634,419 Confirmation No.: 7789  
APPLICANT(S) : JAMES LESTER HICKS, ET AL  
FILED : AUGUST 5, 2003  
ART UNIT : 1624  
EXAMINER : VENKATARAMAN BALASUBRAMANIAN  
DOCKET NO. : PC25286A  
CUSTOMER NO. : 28880

*Fee only*

Mail Stop Amendment  
Commissioner for Patents  
PO BOX 1450  
Alexandria, VA 22313-1450  
FAX: 571-273-8300

**AMENDMENT AND REPLY UNDER 37 C.F.R. § 1.111**

Dear Sir:

This paper is responsive to a non-final Office Action mailed September 26, 2005 ("Office Action") and is being mailed or transmitted before the 3-month deadline for reply of December 26, 2005. The Commissioner is hereby authorized to charge any fees that may be required, or credit any overpayment, to deposit account number 23-0455.

Amendments to the claims begin on page 2.

Remarks begin on page 12.

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PC25286A

Respectfully submitted,

Date: December 14, 2005

Claude F. Purchase, Jr.

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**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

10634419

**CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
TOTAL CLAIMS	13	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	15 minus 20 = *	0
INDEPENDENT CLAIMS	1 minus 3 = *	0
MULTIPLE DEPENDENT CLAIM PRESENT		<input checked="" type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

1274-05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 12	Minus ** 20	= -
Independent	* 4	Minus *** 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	750.00
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+280=	280.00
TOTAL		OR	TOTAL	1030.00

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
<del>100</del> X43=		OR	<del>100</del> X86=	200
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	200

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	